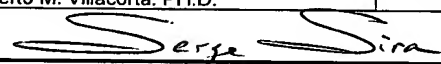


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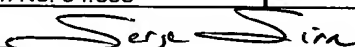
Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney 330310.00103 First Inventor LELAND SHAPIRO Title INHIBITORS OF SERINE PROTEASE ACTIVITY, METHODS AND COMPOSITIONS FOR TREATMENT OF NITRIC OXIDE-INDUCED CLINICAL CONDITIONS Express Mail	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		Mail Stop Patent Application ADDRESS TO:	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 56] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]</p> <p>5. Oath or Declaration [Total Pages 2]<ul style="list-style-type: none">a. <input type="checkbox"/> Unexecuted Declarationb. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <small>(Appendix)</small></p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paperc. <input type="checkbox"/> Statements verifying identity of above copies</p> <p style="text-align: center;">ACCOMPANYING APPLICATIONS PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS/PTO-1449) <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: </p>	
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 10/427,929</p> <p>Prior application information: Examiner _____ Group / Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.</p>			
10. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		27160	
<input type="checkbox"/> Correspondence address below			
Name Katten Muchin Zavis Rosenman			
Address 525 West Monroe Street, Suite 1600			
City Chicago		State Illinois	Zip Code 60661-3693
Country United States		Telephone 202 625-3621	Fax 312 902-1061
Name (Print/Type) Serge Sira, PH.D. Gilberto M. Villacorta, PH.D.		Registration No. (Attorney/Agent) 39,445 / 34,038	
Signature 		Date	September 25, 2003

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FEE TRANSMITTAL for FY 2003 <small>Patent fees are subject to annual revision.</small>		Complete if Known																																																																																																																																																																																															
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<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account Deposit Account Number: 50-1710 Deposit Account Name: KATTEN MUCHIN ZAVIS ROSENMAN The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>400</td><td>2252</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>920</td><td>2253</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,440</td><td>2254</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,960</td><td>2255</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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1201	84	2201	42	Independent claims in excess of 3																																																																																																																																																																																													
1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																																																																																													
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																																																																																													
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																													
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**or number previously paid, if greater; For Reissues, see above																																																																																																																																																																																																	
SUBMITTED BY		Complete (if applicable)																																																																																																																																																																																															
Name (Print/Type)	Serge Sira, PH.D. for: Gilberto M. Villacorta, PH.D. Registration No. 34.038	Registration No. (Attorney/Agent)	39,445																																																																																																																																																																																														
Signature		Telephone	202.625.3621																																																																																																																																																																																														
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